



GAF- Architectural Information Services
 Phone: 800-423-7663 option 4
 Email to AIS@gaf.com

Request Date:
 Date Needed:
 Territory Manager:

**STEEP SLOPE CUT SPEC – DESIGN LINE – SUBMITTAL EXPRESS FORM
 PROJECT INFORMATION**

Project Name:

Address:	City:	State:	Zip:
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No. of buildings:	Total Squares:	Roof Slope:	Height:	Width:	Length:
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Status: Secured Bid	Start Date:	Bid Date:
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BUILDING OWNER

Company/Owner Name:	Contact:
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Address:	City:	State:	Zip:
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Phone:	Email Address:
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CONTRACTOR

Company/Owner Name:	Contact:
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Address:	City:	State:	Zip:
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Phone:	Email Address:
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ARCHITECT/CONSULTANT

Company Name:	Contact:
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Address:	City:	State:	Zip:
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Phone:	Email Address:
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DOCUMENTS REQUIRED

Submittal Express	Cut Spec	Design Line	System Letter
For Submittal Express, do you need: Data Sheets SDS Sheets Contractor Letter Other:	Do you need hard copies? Yes No # of copies: Bound Unbound	Do you need samples? Yes No # of samples:	

Send packages to:	Contact:
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Address:	City:	State:	Zip:
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Phone:	Email Address:
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GUARANTEE INFORMATION

Guarantee Type:	Other:
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ROOF SYSTEM INFORMATION

Construction Type: New Tear-Off Recover	If recover, describe existing components to remain:	Deck Type: Thickness:
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Shingle:
Color:

Underlayment:

Leak Barrier: Full deck application

Starter Strip:

Hip and Ridge Shingle

Ventilation: Other:

Roofing Cement:

Metal Flashing:

Valleys:

NAIL BASE INSULATION (if applicable)

Polyiso Thickness:	Sheathing: Other:	Wood Spacer Blocks Other:
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Additional information or comments: